and such, if they are building roads, improving them, or building bridges or whatever, they have to incorporate in their planning bike paths and walking paths along with them. I am not saying they have to build those; I am just saying that at least they ought to have them in their plans. Again, thinking about kids going to school, they ought to have sidewalks along their streets going to school so they can walk to school. Many places don't have sidewalks and bike paths and walking paths.

My point is that there are a lot of things outside of the health care environment we normally think of that can be very helpful for prevention and wellness-workplaces, workplace wellness. There are some companies in this country doing a great job with this. They have set up wellness programs, guidance programs. nutrition antismoking programs for employees, and in every case I have ever looked at where you have the incentives and the company really goes to work at this, they find some amazing results. They find their absenteeism goes down, they find workers are much more productive than they had been in the past, and they find their health care costs going down. Now, we need to make this available to every business in this country small businesses, people who employ 10 people or more. There has to be something including a component of prevention in the workplace.

So I mentioned schools, workplaces, communities. Communities have to be involved. We need to promote commu-

nity wellness programs.

The Trust for America's Health earlier this year came out with a study they had done on community-based wellness programs and the return on investment. Most times when you talk with people about prevention and wellness, they say: Oh, that is all fine, but you don't get a payback for 20 or 30 years. The Trust for America's Health did a study State by State and they showed that in these cases where the communities had community wellness programs, that actually, in the first year—in the first year—there was almost a 2-to-1 return. For every dollar they invested, they got \$2 back the very next year, and it increased every year after that. So we have to think about how we promote communitybased wellness programs.

The elderly. I can't think of how many times I have been to senior citizens centers, congregate meal sites, some independent living centers, and those types of places where we see so many elderly on drugs. They are on so many drugs. They can't keep track of the 15 pills they have to take every day. Well, there have been some very good studies done, on the fact that if you give the elderly better nutrition, better exercise, better social ability, you can get them off some of those drugs-maybe not all of them, but you can get them off of half of the drugs or more that they are taking. So there are a lot of things we can do just, as I say, outside.

Within health care, there are a lot of things too. Students are going to medical school today, taking all of these courses on medicine and drugs and pharmacology year after year; very intensive, very hard studies. I think I would not be wrong in saying that most medical school students today, at most they might have one 3-hour credit course at the end of their study where they take something dealing with prevention. It is just not a factor in medical schools. It should be. It should be a factor in nursing schools. Any health care professional, any health care profession should have that component, including physicians assistants, nurse practitioners, and anyone involved in the health professions. So that is another part also.

We need to be thinking about how we can beef up our public health service in this country. When I was a young kid going to public school, we had school nurses, and they came around and made sure we had our vaccinations and things such as that, and that we exercised. We don't do that anymore. We have to restructure our public health service in this country, to think about how we better utilize the public health service.

If you go to medical school now, Medicare is one of the biggest funders of medical schools now, or if you go into the military, the military will put you through medical school and then you pay it back in 8 to 10 years for your medical school training. But what if you wanted to be a public health service officer, you wanted to go to medical school and maybe take one of the courses in public health? Well, that would apply there too. Why not pay their way through college, and then they pay it back for working in the public health service for a number of years.

We think about the several hundred community health centers we have in this country, doing a great job. Why aren't they a part of the Public Health Service Corps in America, and utilize them for prevention and wellness, diagnostics? Quite frankly, people should not have to pay a copay or a cost share to get a colonoscopy, or breast cancer screening or a host of other things for diagnosis. Annual physical checkups; there shouldn't be a copay or cost share for that. That is just keeping people from doing it. When you detect things early and you can intervene early, that is part of prevention also, earlier diagnostics.

Again, this has to be a big part—I think the centerpiece—of health care reform because it is the only way we are going to actually save money. Well, you may save money in a bigger pool and better insurance, that type of thing, yes, but the big bucks we will save and will make our people more productive and healthy is to have prevention and wellness.

Yesterday, I convened a meeting of the key groups that have been active in the wellness and prevention field, including the Trust for America's Health, the Partnerships for Prevention, the Robert Wood Johnson Foundation, the American Diabetes Association, the American Heart Association, the American Cancer Society, the YMCA, the American Medical Association, and many others. This was yesterday. It was an excellent session, with a room full of people who all realize this is the time for bold thinking and real change. In addition, I intend to hold additional hearings in December.

This working group that Senator Kennedy asked me to chair will reach out broadly. We wish to capture the best ideas, the best practices. Our goal is nothing less than to transform America into a genuine "wellness soci-

ety."

To borrow a phrase, that is change you can believe in. It is also change that is long overdue.

To date, wellness and prevention have been the missing pieces in the national conversation about health care reform. It is time to make them the centerpiece of the conversation—not an asterisk or a footnote but centerpiece of our conversation on health care reform.

As chair of the Prevention and Public Health Working Group, I look forward to working with my colleagues on both sides of the aisle to solicit ideas and input. Promoting wellness and preventing disease is not about party or ideology; it is about pragmatism and common sense. It is about what works—keeping people healthy and keeping costs down, making people more productive in their daily lives.

We have a big job ahead of us, but I am confident the new President and the new Congress can deliver on health care reform, and we can do it in the next calendar year. Yes, we can greatly expand access to the health care system—or as I call it, the "sick care" system. At the same time, if that is all we do, we will have failed. We can and must transform America's sick care system into a true health care system, one that makes preventing illness and staying well every bit as important as curing the illness later on.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. NELson of Nebraska). Without objection, it is so ordered.

UNANIMOUS-CONSENT AGREEMENT—H.R. 6867

Mr. REID. Mr. President, I ask unanimous consent that at 3 p.m. today, the Senate proceed to vote on the motion to invoke cloture on the motion to proceed to H.R. 6867; that if cloture is invoked on the motion to proceed, then

all postcloture time be yielded back and the motion to proceed be agreed to; that after the bill is reported, it then be read a third time, and the Senate proceed to vote on passage of the bill, without further intervening action or debate; that if cloture is not invoked on the motion to proceed, then a motion to reconsider the failed cloture vote be considered as entered, and the Senate then proceed to a period of morning business, with Senators permitted to speak for up to 10 minutes each.

The PRESIDING OFFICER. Is there objection?

Mr. REID. If the Chair will withhold, I appreciate very much all Senators' thoughtful consideration of what we are trying to accomplish. I especially extend my appreciation to the Republican leader for his stepping out of important meetings to take calls from me and being available to help us work our way through these difficult times.

We are all trying to accomplish the same thing. We have an economy that is in peril, and we want to make sure we do everything we can within reason and keeping with our responsibilities to succeed.

The PRESIDING OFFICER. Is there objection?

Mr. ALEXANDER. No objection.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. REID. This will be the last vote

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. The hour of 3 p.m. having arrived, morning business is now closed.

UNEMPLOYMENT COMPENSATION EXTENSION ACT OF 2008—MOTION TO PROCEED

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of the motion to proceed to H.R. 6867, which the clerk will now report.

The assistant legislative clerk read as follows:

Motion to proceed to the consideration of Calendar No. 1123, H.R. 6867, an act to provide for additional emergency unemployment compensation.

CLOTURE MOTION

The PRESIDING OFFICER. Under the previous order, pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will report.

The assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the motion to proceed to Calendar No. 1123, H.R. 6867, the Unemployment Compensation Extension Act of 2008.

Harry Reid, Max Baucus, Patrick J. Leahy, Bernard Sanders, Kent Conrad, E. Benjamin Nelson, John D. Rockefeller, IV, Dianne Feinstein, Robert P. Casey, Jr., Patty Murray, Richard Durbin, Sheldon Whitehouse, Barbara A. Mikulski, Barbara Boxer, Carl Levin, Daniel K. Akaka, Mark L. Pryor.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the motion to proceed to H.R. 6867, an act to provide for additional emergency unemployment compensation, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Delaware (Mr. BIDEN) and the Senator from Arkansas (Mrs. LINCOLN) are necessarily absent.

Mr. KYL. The following Senators are necessarily absent: the Senator from Georgia (Mr. CHAMBLISS) and the Senator from New Hampshire (Mr. SUNUNU).

The PRESIDING OFFICER (Ms. KLOBUCHAR). Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 89, nays 6, as follows:

[Rollcall Vote No. 214 Leg.]

YEAS-89

Akaka	Dorgan	Mikulski
Alexander	Durbin	Murkowski
Allard	Ensign	Murray
Baucus	Feingold	Nelson (FL)
Bayh	Feinstein	Nelson (NE)
Bennett	Graham	Pryor
Bingaman	Grassley	Reed
Bond	Gregg	Reid
Boxer	Hagel	Roberts
Brown	Harkin	Rockefeller
Brownback	Hutchison	Salazar
Bunning	Inouye	Sanders
Burr	Isakson	Schumer
Byrd	Johnson	Sessions
Cantwell	Kennedy	Shelby
Cardin	Kerry	Smith
Carper	Klobuchar	
Casey	Kohl	Snowe
Clinton	Kyl	Specter
Cochran	Landrieu	Stabenow
Coleman	Lautenberg	Stevens
Collins	Leahy	Tester
Conrad	Levin	Thune
Corker	Lieberman	Vitter
Cornyn	Lugar	Voinovich
Craig	Martinez	Warner
Crapo	McCain	Webb
Dodd	McCaskill	Whitehouse
Dole	McConnell	Wicker
Domenici	Menendez	Wyden

NAYS-6

DeMint	Hatch
Enzi	Inhof

NOT VOTING-4

Biden Lincoln Chambliss Sununu

The PRESIDING OFFICER. On this vote, the yeas are 89, the nays are 6. Three-fifths of the Senators duly chosen and sworn having voted in the affirmative, the motion is agreed to.

Under the previous order, all postcloture time is yielded back and the motion to proceed is agreed to.

Mr. KENNEDY. Madam President, next week we will celebrate Thanks-giving—a holiday to be with family and to give thanks for the many blessings

we enjoy. But this year, American families gathering around the Thanksgiving table are burdened with serious worries: Are we going to lose our home? Can we afford to retire when our savings have been wiped out? Will we have to choose between sending our children to college and paying our medical bills?

One of the greatest hardships millions of Americans are facing is the loss of their jobs. The current job market is the worst in the past quarter century. Over 1 million people have lost their jobs this year—half a million in September and October alone. Last week, more workers filed for unemployment benefits than at any time since the tragedy of September 11, 2001. Economists predict the unemployment rate will continue to climb from its current 14-year high of 6.5 percent to well over 8 percent in the coming year.

Earlier this year, Congress approved additional unemployment benefits for workers. That was an important step, but families need additional support. Unemployment benefits have expired for many workers, and finding a new job is far more difficult as the recession deepens. More than 2 million Americans have been unable to find work for more than 6 months. If Congress fails to extend benefits again this year, nearly 1.2 million Americans will have exhausted their benefits by the end of the year.

That's why this legislation is so essential. It provides 7 additional weeks of unemployment assistance to workers whose benefits have expired, and an additional 13 weeks for jobless workers in high-unemployment states. This bill has already passed the House overwhelmingly, with strong bipartisan support. By acting today, we will deliver immediate aid to many of the neediest Americans who are unable to find work.

Not only does the extension of unemployment benefits provide a lifeline for struggling families, it also serves as a needed and immediate stimulus for the economy—each dollar of unemployment benefits generates \$1.64 in economic growth. I urge my colleagues to join me in supporting this critical extension of unemployment assistance.

Providing these additional unemployment benefits, however, is not the only step we must take to help working families meet the tough challenges that lie ahead. Jumpstarting our economy and restoring American prosperity will take bolder vision and more decisive action. We need to create good jobs for the millions of Americans who want to work. That means investing in our workers, investing in our infrastructure, and investing in technology for the future. It also means repairing the broken safety nets, so that more families who are being hurt by this downturn can get back on their feet.

I wish we could have done more in this lame-duck, but at least we are taking an important step. I look forward to working with our new President and the new Congress in January